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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING

Atty Docket No.
RAZZ1100-1

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In the Application of:

Douglas Cosby

Date Filed:

March 25, 2004

Title:

**HIERARCHICAL REFERENCE DATA
MANAGEMENT SYSTEM AND METHOD**

I hereby certify that the attached Request for Withdrawal as Attorney or Agent and Change of Correspondence Address, and Postcard, are being deposited with the United States Postal Service First Class Mail service under 37 C.F.R. § 1.8, on March 3 2006, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted,

SPRINKLE IP LAW GROUP



A handwritten signature in black ink that reads "Stacy Sutton Kerby". Below the signature, the name "Stacy Sutton Kerby" is printed in a smaller, clean font.

**REQUEST FOR WITHDRAWAL AS
ATTORNEY OR AGENT AND CHANGE
OF CORRESPONDENCE ADDRESS**

Application No.	10/809,056
Filing Date	03/25/2004
First Named Inventor	Douglas Cosby
Art Unit	2171
Examiner's Name	Gaffin, Jeffrey A.
Atty. Docket No.	RAZZ1100-1

To: Commissioner for Patents**P.O. Box 1450****Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- All the attorneys/agents of record
 The attorneys/agents (with registration numbers) listed on the attached papers(s), or
 The attorneys/agents associated with Customer Number **44654**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Applicant requested file be transferred to new counsel**CORRESPONDENCE ADDRESS**

1. The correspondence address is NOT affected by this withdrawal
2. Change the correspondence address and direct all future correspondence to:

 The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Marc Hannish Thelen, Reid & Priest, LLP		
Address	225 West Santa Clara Street, Suite 1200		
City	San Jose	State	CA
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Telephone	408.292.5800	Email:	mhanish@thelenreid.com
Signature			
Name	John L. Adair	Reg. No. 48,828	
Date	March 3, 2006	Telephone No. 512-637-9220	

NOTE: Withdrawal is effective when approved rather than received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.